**Dan Bernal** President

**Laurie Green, M.D.** Vice President

Edward A. Chow, M.D. Commissioner

**Susan Belinda Christian, J.D.** Commissioner

Cecilia Chung Commissioner

Suzanne Giraudo ED.D

Commissioner

Tessie M. Guillermo Commissioner

# HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO

London N. Breed Mayor Department of Public Health



Grant Colfax, MD
Director of Health
Mark Morewitz, M.S.W.
Executive Secretary

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## MINUTES HEALTH COMMISSION MEETING

Tuesday, December 7, 2021 4:00 p.m. Remote Meeting via Webex Event

#### 1) CALL TO ORDER

Present: Commissioner Dan Bernal President

Commissioner Laurie Green, MD, Vice President

Commissioner Edward A. Chow M.D. Commissioner Suzanne Giraudo, Ph.D Commissioner Tessie Guillermo

**Excused:** Commissioner Susan Belinda Christian, J.D.

Commissioner Cecilia Chung

The meeting was called to order at 4:05 pm.

#### 2) DPH EMPLOYEE RECOGNITION AWARDS

The following DPH teams were recognized by the Health Commission for their dedication and impactful contributions to the health and well-being of all San Franciscans.

#### **COVID Task Force Neighborhood Vaccination Team**

- Amabel Chow
- Jonathan Fuchs
- Na'lmah Crum
- Emily Raganold
- Maryna Spiegel
- Alexis Mendez
- Sophia Balestreri
- Lucy Arellano
- Berta Hernandez
- Qianya Vinson

- Mar Cury
- Mireya Lopez
- Oscar Macias
- David Leiva
- Kit Ching
- Lorena Zevla
- Giovanni Panopio
- Phil De la Cruz
- Colei Obrien

#### **COVID Task Force Logistics Supply Unit**

- Daisy Aguallo
- Solomon Gebala
- David Lawlor
- William Pon

#### **Bridge HIV**

- Al Liu
- Alfonso Diaz
- Cat-Dancing Alleyne
- Delia Molloy
- Eli Nevel-Tyler
- Emily Schaeffer
- Fiona O'Connell-Gates
- Gabriella Green
- Garza Ascencios
- William Juarez

- Kris Leonoudakis-Watts
- Giovanni Sanchez
- Jorell Bumagat
- Patrick Pacleb
- Hyman Scott
- Ivette Vasquez
- Janie Vinson
- Kenneth Coleman
- Nicholas Ng
- Patricia Von Felten
- Rafael Gonzalez
- Susan Buchbinder
- Theresa Wagner

### 3) RESOLUTION MAKING FINDINGS TO ALLOW TELECONFERENCED MEETINGS UNDER CALIFORNIA GOVERNMENT CODE SECTION 54953(e)

Action Taken: The Health Commission unanimously approved the resolution. (See attached)

#### 4) RESOLUTION ADDRESSING HEALTH DISPARITIES OF THE LOCAL AMERICAN INDIAN COMMUNITIES

Mark Morewitz, Health Commission Executive Secretary, presented the item. The following comments by elders and community leaders were also included in the item discussion:

Sharaya Souza, Executive Director, American Indian Cultural District, stated that the American Indian communities have been left out of the city's COVID-19 targeted outreach programs, even though infection rates in this community are high, and racial equity efforts. She noted that a review of the DPH Cultural Competence Plan updates in 2010 and 2016, shows little data for the American Indian communities. While only 1.4% of the DPH budget is allocated towards specific services for American Indians, this community has the highest rate of HIV in the county and American Indians are more likely to be homeless than any other population. There is a discrepancy in data and funding for this community. She invites the DPH to engage more deeply with the American Indian community and to increase its racial equity efforts, including better data collection and representation. She voiced concern that the health data reported to the Indian Health Services, a federal organization, is not shared with the DPH. She also spoke about the importance of culturally sensitive services to meet the needs of the community.

Dauwila Harrison, Contracts and Compliance Manager, Friendship House Association of American Indians, gave an overview of the array of services offered at the organization. She also noted the importance of reliable data that accurately represents health disparities the American Indian communities face.

Anthony Guzaman, Director of Community Wellness, Native American Health Center, noted that the organization's Community Wellness department is the intersection of cultural traditions of the community. He noted that urban American Indian life is in a resurgence; this is a result of federal United States policies to ship American Indians off reservations to cities during the 1950's. Those that were sent to San Francisco at that time faced many challenges with ensuring basic needs were met. Organizations formed to meet the needs of the American Indian and Native Alaskan communities. These organizations need continued support from the DPH and city to continue to be able to meet the needs of these communities.

April McGill, Executive Director, American Indian Cultural Center, stated that all the community organizations have played a primary role in the health and well being on the American Indian and Native Alaskan communities. She noted that American Indian youth have high rates of suicide and the local organizations need consistent funding to ensure the youth and all community members have access to culturally appropriate services. She also stated that the Bay Area is ranked 5<sup>th</sup> highest in the number of trafficked and murdered American Indian and Native Alaskan women; the community is in need of public health services. She requested that the DPH include these communities when it considers health equity initiatives.

Virginia Hedrick, Executive Director, California Consortium for Urban Indian Health, stated that timely and accurate data is vital for the health and wellbeing of any community. She also stated that there is a high rate of misclassification of American Indians and Native Alaskans on death certificates by medical providers. This often contradicts the information on the person's birth certificate. This type of misclassification results in undercounting of deaths within this community and contributes to the invisibility of these communities. She noted that voices coming directly from the community are the most potent barometers of the issues faced in those communities.

#### **Public Comment:**

Cora Hermoso, DPH staff member, stated that she is not in favor of the city's COVID-19 vaccine mandate. There is no law that requires anyone to consent to violation of protected rights.

#### **Commissioner Comments:**

Commissioner Bernal stated that he is grateful for the partnership of the American Indian community and noted that the best work of the DPH is done within and in partnership with the community.

Commissioner Green thanked all the community elders and leaders for their comments, which have educated the Commission and public on issues faced by these communities.

Commissioner Chow stated that he is pleased the resolution directs the DPH to address the public health needs of the American Indian and Native Alaskan communities in a more direct manner. This includes disaggregating data and using footnotes to declare when the data is too small to provide analytical significance, so that these communities are represented in funding and health equity programmatic decisions. He also encouraged the community to work with the DPH, noting the City is an enormous bureaucracy. However, it is important for each community to be seen and heard. He also looks forward to the 6-month update from DPH on progress made with the community.

Commissioner Guillermo supports the resolution and thanked the community for their passionate advocacy. She has a connection to the issue of data for smaller communities. When she led the Pacific Islander Health Forum, she worked with James Crouch, the California American Indian Rural Health Board, to educate communities that had been historically marginalized, on health policy, data, and access. She noted that concept of social determinants of health were apparent in these communities when she was conducting this community work years ago. She is proud to be part of the Health Commission now as it considers the resolution.

Director Colfax affirmed his commitment to achieve the goals of the resolution, with Dr. Bennett and other DPH staff, once it is approved.

#### 5) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF NOVEMBER 16, 2021.

Action Taken: The Health Commission unanimously approved the amended November 16, 2021 minutes.

#### 6) DIRECTOR'S REPORT

Grant Colfax, MD, DPH Director of Health, presented the item.

#### SF identifies the first Omicron variant case in the US

On December 1, the California and San Francisco Departments of Public Health confirmed that a case of COVID-19 among an individual in California was caused by the Omicron variant (B.1.1.529). The individual was a traveler who returned from South Africa on November 22, 2021. The individual is a San Francisco resident.

Genomic sequencing was conducted at the University of California, San Francisco and the sequence was confirmed at CDC as being from the Omicron variant. This was the first confirmed case of COVID-19 caused by the Omicron variant detected in the United States.

The recent emergence of the Omicron variant (B.1.1.529) further emphasizes the importance of vaccination, boosters, and general prevention strategies needed to protect against COVID-19. Everyone 5 and older should get vaccinated and boosters are recommended for everyone 18 years and older. San Francisco has one of the highest vaccination rates in the world at 81% of the eligible population, and is currently administering boosters to more than 5,000 vaccinated individuals a day. The City also has in place other safety protocols, such as universal masking in indoor public settings, and proof of vaccination requirements for certain businesses, as well as a robust testing and surveillance system. These safety measures put the City in a good position to fight COVID variants, such as Omicron.

For more information on the Omicron variant visit <a href="https://www.cdc.gov/coronavirus/2019-ncov/variants/index.html">https://www.cdc.gov/coronavirus/2019-ncov/variants/index.html</a>.

#### DPH urges safer choices during holiday season, recommends boosters for all adults

As the winter holiday season is upon us, DPH supports safe celebrations and gatherings as an important part of recovery from the pandemic, especially when it comes to our mental health and overall wellbeing.

As we work to slow the spread of the virus, it is more important than ever to exercise caution and make safer choices to prevent the spread of COVID-19 during the holidays. There are many common-sense measures such as vaccinations, masking, testing that can help keep us safe and protect the most vulnerable among us from developing a severe case of COVID or becoming hospitalized.

**SFDPH is now recommending COVID-19 boosters for everyone 18 and older** to strengthen their immune systems. Boosters are now <u>essential</u> for anyone in a higher risk category, including seniors ages 65 and older; people with underlying medical conditions; people who live and work in high-risk settings; and anyone who received a Johnson & Johnson vaccine.

**Newly eligible for vaccines are children ages 5 to 11**, and they should begin their two-dose vaccination series as soon as possible. A person is not fully vaccinated until two weeks after their second primary dose.

Keep in mind that San Francisco's <u>Safer Return Together health order</u> is still in effect, requiring indoor masks in most public settings where people come and go, such as retail stores, and proof of vaccinations where food and drink is consumed, such as restaurants and bars.

#### SFDPH guidance on celebrating safely includes the following:

- Get vaccinated against COVID-19, including children ages 5-11 now that they are eligible.
- Get a COVID-19 booster -- especially if you're a senior or at higher risk.
- Get a flu vaccine, which can be taken safely with a COVID-19 booster
- Choose outdoor activities over indoor activities, and limit being in crowds especially if you are unvaccinated
- Wear a mask in crowded outdoor settings, or whenever feasible in private indoor settings especially when unvaccinated are present or the vaccination status of those present is unknown
- Wash your hands frequently and carry hand sanitizer wherever you go
- Delay travel until you are fully vaccinated. This means two weeks after completing your primary dose series (two doses for Pfizer and Moderna or one dose of Johnson & Johnson)
- Monitor your health and stay home if you feel sick, and get tested
- Consider testing within 72 hours before you travel or gather with others as you may have an asymptomatic infection. You can use an FDA-approved rapid at-home, self-test kit, reach out to your health service provider, a travel testing provider, or to receive a test, go to: sf.gov/gettested

San Francisco is making progress on vaccinating and boosting our residents as a result of the efforts of community partners and nearly 100 vaccination sites across the City that are within a 10-15- minute walk of most residents. These efforts will help the City avert a winter surge, in addition to San Franciscans making safer choices as they enjoy the holidays together.

For more information on where to get a vaccination or booster in San Francisco visit: sf.gov/getvaccinated.

#### One-year anniversary of Street Crisis Response Team

November 30, 2021 marked the one-year anniversary of the launch of the Street Crisis Response Team (SCRT). SCRT has grown from a single team supporting the Tenderloin neighborhood to six teams providing San Francisco with 24/7 citywide coverage in one year. SCRT responds rapidly to people who are having a crisis on City streets with a behavioral health approach that deescalates situations and addresses a person's immediate needs for care, treatment, and shelter.

Data from the year show that SCRT has taken more than 5,000 calls and engaged with nearly 3,000 people in crisis. In early 2022, a seventh team with six additional staff will launch.

Demonstrating the program's success as an alternative to law enforcement, SCRT diverted more than one-third of all 911 calls (38%) for "mentally disturbed persons" from law enforcement cumulatively during its first year of operation. With six teams launched, SCRT is now diverting over half (58%) of calls monthly for "mentally disturbed persons" from law enforcement. Once fully operational, SCRT seeks to divert 100% of calls.

Each SCRT team is staffed with a community paramedic from SFFD, a behavioral health clinician from HealthRIGHT360, and a peer specialist with lived experience from RAMS, Inc. (Richmond Area Multi-Services) who together have the range of specialty skills to engage on scene with a person in crisis. As of April 2021, SCRT is supported by a dedicated follow-up team that provides coordinated care linkages, often within 24-hours of the initial encounter. Since April, nearly a third (31%) of all people who interact with SCRT are successfully re-engaged with follow-up care such as being connected to a provider or treatment program.

SCRT is an important component of the City's Mental Health SF initiative for improving the mental healthcare for people experiencing homelessness. Most people who SCRT serves (76%) are currently experiencing homelessness, a condition that puts them at significantly higher risk for negative health outcomes and creates challenges in accessing services and long-term mental health and medical care. SCRT's street-based response

offers a different approach from the traditional facility-based care by delivering support directly to communities.

If you see someone in a crisis, please call 911 and describe what you are seeing to the trained operators. More information about SCRT can be found at: sf.gov/street-crisis-response-team

#### **DPH and Getting to Zero SF recognize World AIDS Day**

On Thursday, December 2, Getting to Zero SF (GTZ-SF) hosted a virtual event marking World AIDS Day. World AIDS Day, designated on December 1<sup>st</sup> of every year since 1988, is an international day dedicated to raising awareness of the AIDS pandemic and mourning those who have died of the disease. The President of the United States has made an official annual proclamation for World AIDS Day since 1993. This year's Getting to Zero event acknowledged the overlap between the HIV/AIDS and drug overdose crises, both of which disproportionately impact vulnerable communities and have resulted in preventable deaths. Dr. Grant Colfax provided opening remarks and an interactive panel discussion included two DPH leaders—Dr. Philip Coffin, Director of Substance Use Research, and Dr. Nicky Mehtani, lead HIV clinician for the Street Medicine Program. Thank you to GTZ-SF and DPH leadership for raising awareness and centering collective action on this important day.

#### **DPH Land Acknowledgment policy**

In San Francisco, the American Indian Cultural District advocated that City government and agencies "Honor the First People of San Francisco, The Ramaytush Ohlone, by recognizing them and their ancestral homelands prior to all City meetings." A Land Acknowledgement is a formal statement that recognizes and respects the history and connection between the Ramaytush Ohlone and the region. DPH recognizes that this is an important step in acknowledging and honoring the land, culture, wisdom, and contributions of the Ramaytush Ohlone as the original peoples of the San Francisco Peninsula. This past summer, the San Francisco Health Commission passed a resolution to include this important recognition in public meetings. At DPH, we have expanded our policy, and now all DPH meetings with 20 or more people should begin by reading the following Ramaytush Ohlone land acknowledgment:

We acknowledge that we are on the unceded ancestral homeland of the Ramaytush (rah-my-toosh) Ohlone (O-lon-ee) who are the original inhabitants of the San Francisco Peninsula. As the Indigenous stewards of this land, and in accordance with their traditions, the Ramaytush Ohlone have never ceded, lost, nor forgotten their responsibilities as the caretakers of this place, as well as for all peoples who reside in their traditional territory. As guests, we recognize that we benefit from living and working on their traditional homeland. We wish to pay our respects by acknowledging the Ancestors, Elders, and Relatives of the Ramaytush Ohlone community and by affirming their sovereign rights as First Peoples.

#### **Environmental Health Branch Agricultural Program**

DPH Environmental Health's Agricultural Commissioner, Cree Morgan, and his staff recently confirmed public reports of an invasive plant species, Dittrichia viscosa (false yellowhead) growing in two parcels of land in the city. Previously, the only know North American locality for this plant was a small area along Highway 80 in Solano County. The California Department of Food and Agriculture considers this plant to be a Category A invasive weed species and represents a significant threat to California. Cree and his team immediately conducted surveys to determine the extent of the weed growth and were able to provide training for the safe removal of the plants which have now been double bagged and are awaiting proper disposal. This is just one example of the great work the Agricultural Program does every day to protect both San Francisco and the State of California from invasive species. Thank you, team!

#### **Training offerings from the Trauma Informed Systems Initiative**

The DPH Trauma Informed Systems Initiative (TIS) is offering two trainings this month to DPH staff. Registration links are below:

- December 8: New Employee TIS 101: Transforming stress & Trauma during COVID
- December 22: Search Inside Yourself Leadership Institute

#### **SFDPH** in the News

#### **Commissioner Comments:**

Commissioner Bernal thanked Director Colfax for the report.

#### 7) COVID-19 UPDATE

Grant Colfax, MD, DPH Director of Health, presented the item.

#### **Public Comment:**

Orchid Soh, ZSFG Nurse, stated that 95% of individuals with COVID-19 recover without being vaccinated. She noted that the FDA post vaccination data shows that there were 1,200 deaths due to vaccinations.

#### **Commissioner Comments:**

Commissioner Green stated that she has heard from her patients that it is difficult to navigate online appointment systems for COVID-19 vaccine booster shots. Many pharmacies that show "walk-in" availability, actually do not have appointments available. Director Colfax stated that individuals are encouraged to access COVID-19 vaccinations through their general medical practitioners. The DPH is attempting to serve everyone who walks in to department clinics requesting booster shots. He noted that the DPH is in communication with pharmacies regarding these issues noted by Commissioner Green; however, the pharmacies are private businesses, and not under the authority of the DPH regarding this matter.

Commissioner Green noted that individuals who test themselves for COVID-19 using home tests do not report results, so the city-wide COVID-19 data does not include this information. Director Colfax stated that without a requirement to report home test data and a system to receive, clean, and integrate this data, then the data would be biased based on those who self-select to report their data. He noted that case rates may become less of a metric than hospitalizations, due to the high vaccine rate in San Francisco.

Commissioner Bernal asked what are best steps San Francisco residents can take in order to protect themselves from the Omicron variant. Director Colfax urged all San Franciscans to get vaccinated and get a booster if they received their last vaccination more than 6 months ago. He also recommended that residents wear masks as recommended and use testing to augment these other strategies. He noted that the DPH website, <a href="https://www.sfdph.org/dph/alerts/coronavirus.asp">https://www.sfdph.org/dph/alerts/coronavirus.asp</a>, contains more information on prevention strategies and resources.

#### 8) GENERAL PUBLIC COMMENT

Novia, DPH employee for 17 years, does not support the city's COVID-19 vaccine mandate. The DPH rejected their religious exemption request. Why has no religious or medical exemption been approved. The DPH is not following the law. Fear and coercion are not lawful.

Robert Geller, DPH employee for 23 years, stated that they have Crohn's disease, which is the reason they sought a medical exemption. There are 289 cases of the COVID-19 vaccine activating Crohn's disease and harming those individuals.

Liliana De La Rosa, DPH BHS staff member since 2013, stated that they were put on administrative leave when her religious exemption request for the COVID-19 vaccine was denied. They requested that the Health Commission and DPH revisit its COVID vaccine mandate policies so they are in alignment with the 1<sup>st</sup> amendment and Title VII.

An anonymous caller stated that on 11/3/21, Senator Ron Johnson held a debate on COVID vaccinations and the crime of mandating the vaccines. They encouraged the Health Commission to view this debate.

### 9) PROPOSED CHANGES TO CALCULATION OF DPH REVENUE MANAGEMENT RESERVE

Jen Louie, DPH CFO, presented the item.

#### **Commissioner Comments:**

Commissioner Chow stated that he supports this change of policy. He asked if the reserve fund will be included on future DPH quarterly financial reports. Ms. Louie stated that the reports will continue to show the balance of the reserve fund outside of the DPH regular operating financials. Any deposit or withdraw will also be shown.

Action Taken: The Health Commission unanimously approved the DPH Revenue Management

Calculation changes.

#### 10) FY20-21 FOURTH QUARTER AND FY21-22 FIRST QUARTER FINANICAL REPORTS

Jen Louie, DPH CFO, presented the item.

#### **Commissioner Comments:**

Commissioner Giraudo thanked Ms. Louie for the clear report of a very complex budget.

Commissioner Chow asked what the schedule will be for the Health Commission to receive quarterly reports. Ms. Louie stated that the first and third quarterly reports will be made at the Finance and Planning Committee; the second and fourth quarter reports will be made to the full Health Commission. If there is any significant budget news, it will be brought directly to the full Health Commission..

#### 11) DPH REFUSE COLLECTION REGULATIONS

Beronica Slattengren, REHS, Principal Environmental Health Inspector, DPH Environmental Health Services, Population Health Division, presented the item.

#### **Commissioner Comments:**

Commissioner Bernal asked the origin of the 1932 ordinance governing this area. Ms. Slattengren stated that the ordinance was approved by San Francisco voters in 1932.

Commissioner Bernal noted that the new draft regulations being brought to the Health Commission for consideration because there are new residential developments opening on Treasure Island and Yerba Buena Island in February 2022.

Commissioner Bernal asked if the new processes for routes on Treasure Island and Yerba Buena Island would be available only for vendors currently licensed by the DPH. Ms. Slattengren stated that the process for these locations is open to any entity.

Commissioner Bernal noted that the only two existing vendors licensed by the DPH for refuse collection are the two Recology companies listed on the presentation. He asked how change in the system could be made so

other businesses could compete for refuse collection routes in San Francisco. Ms. Slattengren stated that a full legal review is necessary to change the existing process and practice.

Commissioner Bernal asked if there is time limit on the current license for refuse collection in San Francisco. Ms. Lopez stated that she will look into this question.

Commissioner Green asked how the Health Commission can help support change in the ordinance to result in a competitive bidding process, which would include monitoring of performance metrics. Valerie Lopez, Deputy City Attorney, stated that any proposed change to the ordinance would have to be put on the ballot for voters to consider.

Commissioner Green asked if it would be possible to change the ordinance before residents occupy the new buildings on Treasure Island and Yerba Buena Island. Ms. Lopez stated there would not be time to complete this task by February 2022.

Commissioner Green asked for more information regarding the outreach DPH has conducted regarding the license for the new routes. Ms. Slattengren stated that the DPH has utilized its relationships with other city departments to outreach to other relevant businesses, in addition to requesting feedback on the draft regulations.

Commissioner Chow noted that the City Attorney's Office would have to answer the question of time limits asked by Commissioner Bernal soon in order to add that information to the rules and regulations before the Health Commission approved the document. Ms. Lopez stated that any substantive changes to the draft document will require an additional public comment period.

Commissioner Chow asked how compliance is monitored on the vendors holding current refuse collection licenses. Ms. Slattengren stated that the DPH verifies that the vendors meet conditions of the license, which relate to safety of vehicles and equipment.

### 12) RESOLUTION TO AUTHORIZE THE AMOUNT AND REPLENISHMENT OF THE ZUCKERBERG SAN FRANCISCO GENERAL HOSPITAL PATIENT TRUST FUND

This item was deferred to the 1/4/22 meeting.

#### 13) FINANCE AND PLANNING COMMITTEE UPDATE

Commissioner Chow, who chaired the meeting, stated that the Committee reviewed all the items on the Consent Calendar and recommended that the full Health Commission approve all the items. He also noted that the Committee discussed a presentation, SF City Option Escheatment Proposal." He noted that the Committee is in favor of this proposal, which will come before the full Commission for consideration at its 1/4/22 meeting.

#### 14) CONSENT CALENDAR

Action Taken: The Health Commission unanimously approved the following:

- DECEMBER 2021 CONTRACTS REPORT
- REQUEST FOR APPROVAL OF A NEW CONTRACT WITH MOSS ADAMS LLP, TO PROVIDE LEAN MANAGEMENT CONSULTING SERVICES DEPARTMENT-WIDE (THESE SERVICES WERE PREVIOUSLY PROVIDED TO DPH BY RONA CONSULTING GROUP. MOSS ADAMS AND RONA CONSULTING GROUP COMBINED IN 2017). THE TOTAL PROPOSED CONTRACT AMOUNT IS \$2,147,119 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERM OF DECEMBER 11, 2021 THROUGH DECEMBER 10, 2023 (TWO YEARS).

REQUEST FOR APPROVAL OF A NEW CONTRACT WITH REGENTS OF THE UNIVERSITY OF
 CALIFORNIA SF, DEPARTMENT OF EPIDEMIOLOGY AND BIOSTATISTICS TO PROVIDE THE CITY
 AND THE DEPARTMENT OF PUBLIC HEALTH WITH EXPERTISE SUPPORTING COMMUNITY
 OUTREACH AND VACCINE POP-UP STAFFING TO ORGANIZE RESPONSIVE VACCINE POP-UP EVENTS
 IN HIGHLY IMPACTED SAN FRANCISCO NEIGHBORHOODS. THE TOTAL PROPOSED CONTRACT
 AMOUNT IS \$247,167 WHICH INCLUDES A 12% CONTINGENCY. THE TOTAL TERM OF THE
 CONTRACT IS FROM SEPTEMBER 01, 2021 THROUGH JUNE 30, 2022 (10 MONTHS).

#### 15) OTHER BUSINESS:

This item was not discussed.

#### 16) ADJOURNMENT

The meeting was adjourned at 7:16pm.

### Health Commission Resolution 21-15

### RESOLUTION MAKING FINDINGS TO ALLOW TELECONFERENCED MEETINGS UNDER CALIFORNIA GOVERNMENT CODE SECTION 54953(e)

WHEREAS, California Government Code Section 54953(e) empowers local policy bodies to convene by teleconferencing technology during a proclaimed state of emergency under the State Emergency Services Act so long as certain conditions are met; and

WHEREAS, In March, 2020, the Governor of the State of California proclaimed a state of emergency in California in connection with the Coronavirus Disease 2019 ("COVID-19") pandemic, and that state of emergency remains in effect; and

WHEREAS, On February 25, 2020, the Mayor of the City and County of San Francisco (the "City") declared a local emergency, and on March 6, 2020 the City's Health Officer declared a local health emergency, and both those declarations also remain in effect; and

WHEREAS, On March 11 and March 23, 2020, the Mayor issued emergency orders suspending select provisions of local law, including sections of the City Charter, that restrict teleconferencing by members of policy bodies; those orders remain in effect, so City law currently allows policy bodies to meet remotely if they comply with restrictions in State law regarding teleconference meetings; and

WHEREAS, On September 16, 2021, the Governor signed AB 361, a bill that amends the Brown Act to allow local policy bodies to continue to meet by teleconferencing during a state of emergency without complying with restrictions in State law that would otherwise apply, provided that the policy bodies make certain findings at least once every 30 days; and

WHEREAS, While federal, State, and local health officials emphasize the critical importance of vaccination and consistent mask-wearing to prevent the spread of COVID-19, the City's Health Officer has issued at least one order (Health Officer Order No. C19-07y, available online at <a href="https://www.sfdph.org/healthorders">www.sfdph.org/healthorders</a>) and one directive (Health Officer Directive No. 2020-33i, available online at <a href="https://www.sfdph.org/directives">www.sfdph.org/directives</a>) that continue to recommend measures to promote physical distancing and other social distancing measures, such as masking, in certain contexts; and

WHEREAS, The California Department of Industrial Relations Division of Occupational Safety and Health ("Cal/OSHA") has promulgated Section 3205 of Title 8 of the California Code of Regulations, which requires most employers in California, including in the City, to train and instruct employees about measures that can decrease the spread of COVID-19, including physical distancing and other social distancing measures; and

WHEREAS, Without limiting any requirements under applicable federal, state, or local pandemic-related rules, orders, or directives, the City's Department of Public Health, in coordination with the City's Health Officer, has advised that for group gatherings indoors, such as meetings of boards and commissions, people can increase safety and greatly reduce risks to the health and safety of attendees from COVID-19 by maximizing ventilation, wearing well-fitting masks (as required by Health Officer Order No. C19-07), using physical distancing where the vaccination status of attendees is not known, and considering holding the meeting remotely if feasible, especially for long meetings, with any attendees with unknown vaccination status and where ventilation may not be optimal; and

WHEREAS, On July 31, 2020, the Mayor issued an emergency order that, with limited exceptions, prohibited policy bodies other than the Board of Supervisors and its committees from meeting in person under any circumstances, so as to ensure the safety of policy body members, City staff, and the public; and

WHEREAS, The San Francisco Health Commission has met remotely during the COVID-19 pandemic and can continue to do so in a manner that allows public participation and transparency while minimizing health risks to members, staff, and the public that would be present with in-person meetings while this emergency continues; now, therefore, be it

RESOLVED, That San Francisco Health Commission finds as follows:

- 1. As described above, the State of California and the City remain in a state of emergency due to the COVID-19 pandemic. At this meeting, the San Francisco Health Commission has considered the circumstances of the state of emergency.
- 2. As described above, State and City officials continue to recommend measures to promote physical distancing and other social distancing measures, in some settings.
- 3. As described above, because of the COVID-19 pandemic, conducting meetings of this body and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, in person would present imminent risks to the safety of attendees, and the state of emergency continues to directly impact the ability of members to meet safely in person; and be it

FURTHER RESOLVED, That for at least the next 30 days meetings of the San Francisco Health Commission and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, will continue to occur exclusively by teleconferencing technology (and not by any inperson meetings or any other meetings with public access to the places where any policy body member is present for the meeting). Such meetings of the San Francisco Health Commission that occur by teleconferencing technology will provide an opportunity for members of the public to address this body and its committees, including the Zuckerberg San Francisco General Hospital and Laguna Honda Hospital Joint Conference Committees, and will otherwise occur in a manner that protects the statutory and constitutional rights of parties and the members of the public attending the meeting via teleconferencing; and, be it

FURTHER RESOLVED, That the Executive Secretary of the San Francisco Health Commission is directed to place a resolution substantially similar to this resolution on the agenda of a future meeting of the San Francisco Health Commission within the next 30 days. If the San Francisco Health Commission does not meet within the next 30 days, the Executive Secretary is directed to place a such resolution on the agenda of the next meeting of San Francisco Health Commission.

I hereby certify that the San Francisco Health Commission at its December 7, 2021 meetir	ng adopt the
foregoing resolution.	

Mark Morewitz, MSW Health Commission Executive Secretary